

OCT 04 2004

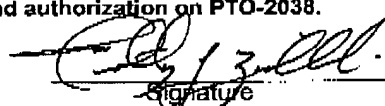
Oct. 4. 2004 2:15PM ZPS GROUP LLC

No. 5642 P. 17

PTO/SB/22 (8-00)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) GEMS8081.150-1										
In re Application of Guclu et al.												
Application Number 10/604,481	Filed 7/24/2003											
For APPARATUS TO SIMULATE MR PROPERTIES OF HUMAN BRAIN FOR MR APPLICATIONS EVALUATION												
Group Art Unit 2859	Examiner Vargas, D.											
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 60%;"><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="width: 40%; text-align: right;">\$ <u>110.00</u></td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: right;">\$ <u>420.00</u></td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: right;">\$ <u>950.00</u></td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: right;">\$ <u>1,480.00</u></td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: right;">\$ <u>2,010.00</u></td> </tr> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$_____.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>07-0845</u>. I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> assignee of record of the entire interest. <input type="checkbox"/> applicant. <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="text-align: center;"> <u>10/4/04</u> Date </div> <div style="text-align: center;">  Signature <u>Timothy J. Ziolkowski</u> Typed or printed name </div> </div>			<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ <u>110.00</u>	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ <u>420.00</u>	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ <u>950.00</u>	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ <u>1,480.00</u>	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ <u>2,010.00</u>
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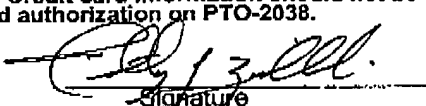
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☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 07-0845.
I have enclosed a duplicate copy of this sheet.

I am the ☐ assignee of record of the entire interest.
 ☐ applicant.
 ☒ attorney or agent of record.
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Registration number if acting under 37 CFR 1.34(a): _____

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10/4/04
Date



Timothy J. Ziolkowski
Typed or printed name

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